

July 15, 2013

Los Angeles County Board of Supervisors

> Gloria Molina First District

Mark Ridley-Thomas Second District

> Zev Yaroslavsky Third District

> > Don Knabe Fourth District

Michael D. Antonovich Fifth District

Mitchell H. Katz, M.D.

Hai F Yee, Jr., M.D., Ph.D Chief Medical Officer

Christina R. Ghaly, M.D. Deputy Director Strategic Planning

313 N Figueroa Street, Suite 912 Los Angeles, CA 90012

> Tel: (213) 240-8101 Fax: (213) 481-0503

www.dhs.lacounty.gov

To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners



TO:

Supervisor Mark Ridley-Thomas, Chairman

Supervisor Gloria Molina Supervisor Zev Yaroslavsky Supervisor Don Knabe

Supervisor Michael D. Antonovich

FROM:

Mitchell Katz, M.D.

Director

SUBJECT:

NOTIFICATION OF DEPARTMENT OF HEALTH

SERVICES' USE OF DELEGATED AUTHORITY
TO CONDUCT A FUNDING REALLOCATION
PROCESS AND AMEND THE HEALTHY WAY LA

CARE INITIATIVE AGREEMENTS

This is to inform the Board that the Department of Health Services (DHS) has exercised its delegated authority as approved by the Board on June 14, 2011 (Attachment I) and June 12, 2012 (Attachment II), to conduct a funding reallocation Request for Information (RFI) process, and intends to amend the Healthy Way LA Care Initiative (HWLA) agreements accordingly as identified in Attachment III.

On June 14, 2011, the Board approved the current HWLA Agreement with Community Partners covering HWLA-Matched and Unmatched Services for the HWLA Health Care Initiative Program to implement the MCE component of the LIHP, as part of the California 1115 Waiver. These agreements replaced the previous Public Private Partnership (PPP), HWLA, and SB474 contracts. On September 20, 2011, the Board delegated authority to DHS to execute amendments to existing HWLA-Matched agreements and to offer new HWLA-Matched agreements to accommodate the transition of current Ryan White Care Act program clients to HWLA. On January 10, 2012, June 12, 2012, and December 18, 2012, the Board delegated authority to DHS to amend existing HWLA agreements to implement administrative and programmatic changes in order to respond to the evolving needs of the HWLA Matched and Unmatched Programs.

In April 2013, DHS reviewed the HWLA Program expenditure data for Unmatched Primary, Specialty, Dental, and Primary SB474 services,

www.dhs.lacounty.gov

Board of Supervisors July 15, 2013 Page 2

and Matched Specialty services, and decided to conduct a funding reallocation RFI process to better utilize the funds. On April 23, 2013, the RFI process was begun using the Board-approved allocation methodology contained in the HWLA agreements in order to maximize the utilization of funds for patient care. During the RFI process, clinics were asked to indicate how much service funding they needed during the contract period. Funding was not re-allocated from providers that indicated they could use all of their funds. The attached spreadsheet (Attachment III) indicates how funds were redistributed. All funding changes from this reallocation are one-time adjustments and will not impact the Fiscal Year (FY) 2012-13 Budget.

If you have any questions or need additional information, please contact Tangerine Brigham at (213) 240-7953.

MHK:pps

Attachments (3)

c: Chief Executive Office County Counsel Executive Office, Board of Supervisors



June 14, 2011

REVISED

Los Angeles County Board of Supervisors

> Gloria Molina First District

Mark Ridley-Thomas Second District

> Zev Yaroslavsky Third District

> > Don Knabe Fourth District

Michael D. Antonovich

Mitchell H. Katz, M.D.

John F. Schunhoff, Ph.D. Chief Deputy Director

313 N. Figueroa Street, Suite 912 Los Angeles, CA 90012

> Tel: (213) 240-8101 Fax: (213) 481-0503

www.dhs.lacounty.gov

To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.



The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, CA 90012

Dear Supervisors:

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

#24 JUNE 14, 2011

5411

SACHI A. HAMAI
EXECUTIVE OFFICER

HEALTHY WAY LA COMMUNITY PARTNER AGREEMENTS FOR
THE HEALTHY WAY LA HEALTH CARE INITIATIVE
IMPLEMENTING THE LOW INCOME HEALTH PROGRAM AS PART
OF CALIFORNIA 1115 WAIVER IN LOS ANGELES COUNTY
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)

SUBJECT

Approval of superseding agreements for the Healthy Way LA Health Care Initiative Program to implement the Low Income Health Program, as part of the California 1115 Waiver, replacing existing Healthy Way LA and Public Private Partnership agreements.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve and authorize the Director of Health Services (Director), or his designee, to execute superseding agreements with current Healthy Way LA (HWLA) and Public Private Partnership (PPP) Community Partners, listed in Attachment A, to: (a) implement the Medicaid Coverage Expansion, under the HWLA Matched Program, as part of the State's Low Income Health Program (LIHP) under the new California 1115 Waiver; (b) extend the PPP Program, under the HWLA Unmatched Program, effective July 1, 2011 through June 30, 2012, with an automatic renewal for an eighteen month period through December 31, 2013; and, (c) extend the South Los Angeles Medical Services Preservation funding in Service Planning Area (SPA) 6 for expanded urgent care services, effective July 1, 2011 through June 30, 2012, with automatic renewal through December 31, 2013, or until 90 days after the new Martin Luther King Jr. Hospital (MLK Hospital) is certified by the federal Centers for Medicare and Medicaid Services (CMS). The maximum obligation for the HWLA Unmatched Program for the period July 1, 2011 through June 30, 2012 is \$56,549,490. The

maximum obligation for the HWLA Unmatched Program component for the period July 1, 2012 through December 31, 2013 is \$84,824,235. The HWLA Matched Program component does not have a maximum obligation as required under the terms of the 1115 Waiver terms and conditions.

- 2 In the Unmatched Program Component, delegate authority to the Director to:
 - a Allocate unused funds "rolled over" from a previous Fiscal Year (FY) to existing providers, in accordance with the Allocation Methodology previously approved by your Board, beginning with County FY 2011-12, up to the original County maximum obligation for each agreement, on a one-time only basis for each FY that the agreements are in effect, on condition that the Director conducts a Request for Information process prior to each adjustment and on further condition that the amendment is approved prior to execution by County Counsel, and the Director provides notice to the Chief Executive Office (CEO) and,
 - b. <u>Transfer funds</u> for each Community Partner, upon request of the Partner, within a SPA once per FY that the Agreements are in effect, with such transfer of funds to occur between service sites and/or between the primary and specialty care service categories, on condition that the amendment is approved prior to execution by County Counsel, and the Director provides notice to the CEO; and,
 - c <u>Transfer funds</u> for each Community Partner, upon the Partner demonstrating a compelling justification, between SPAs and within the same service category and between SPAs and between Community Partner's primary and specialty care service categories, one time per each FY that the Partner's agreement is in effect, with the transfer not to exceed 10 percent of the contract sum for that FY, on condition that the amendment is approved prior to execution by County Counsel, and the Director provides notice to the CEO; and,
 - d. Increase or decrease the maximum obligation of each agreement, beginning with County FY 2011-12, up to the original County maximum obligation for each agreement, on a one-time only basis for each FY that the agreements are in effect, on condition that the Director conducts a Request for Information process prior to each adjustment and on further condition that the amendment is approved prior to execution by County Counsel, and the Director provides notice to the CEO

(Hu)LA;
3. In the Matched Program component, delegate authority for the Director to:

- a Increase or decrease the Medi-Cal Prospective Payment System (PPS) Rate paid under each agreement in the event that a Community Partner's Medi-Cal PPS Rate is either increased or decreased by action of the State at any time during the term of the Agreements, so that the rate paid under each agreement coincides with the rate set by the State, on condition that the amendment is approved prior to execution by County Counsel, and the Director provides notice to the CEO;
- Do adjust the rate paid to a Community Partner which loses or gains Federally Qualified Health Centers (FQHC) or FQHC Look-alike status during the term of the Agreements so that, in the case of loss of such status, the rate accords with that set forth for Non-FQHC Community Partners and, in the case of the gain of such status, the rate accords with the Medi-Cal PPS Rate established by the State, with any adjustment to be effective as of the date that Community Partner's status changes, on condition that the amendment is approved prior to execution by County Counsel, and the Director provides notice to the CEO.
- 4. Delegate authority to the Director to modify the Agreements as to the Matched Program component to incorporate any changes required by either the State or CMS and, as to the Unmatched Program, to incorporate those changes to the extent that they are necessary to ensure consistency between the Program components and the Agreements, on condition that the amendment is approved prior to execution by the County's CEO and County Counsel, and the Director provides notice of such changes to your Board.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

On November 2, 2010, the California Department of Health Care Services (DHCS) and CMS entered into a new 1115 Waiver, commonly known as the California Bridge to Reform, for a five year period, commencing November 1, 2010. This Waiver, also known as a Demonstration Project, provides the framework to move to federal Health Care Reform in 2014. The Waiver will provide health care coverage expansion, continued funding of public hospitals' uncompensated costs, new funding for delivery system improvements at public hospitals, and require transition to Medi-Cal Managed Care for Seniors and Persons with Disabilities.

On December 14, 2010, your Board authorized the Director, acting on behalf of the County, to participate in the new California 1115 Waiver and its LIHP, and to submit all documents necessary to implement its intent to participate Your Board also authorized the Director to expand HWLA in accordance with the Waiver's terms. DHS submitted its

LIHP application to DHCS on February 14, 2011 and received initial approval on April 12, 2011.

Recommendation Number 1:

A crucial component of meeting the primary care access requirements of the Waiver will be through the County's Community Partners, formerly known as the Public Private Partners. Approval of the recommended superseding agreements, substantially similar to Exhibit I, with the Community Partners will enable DHS to be ready for the HWLA expansion, effective July 1, 2011.

Since 1996, the County has had agreements with the Community Partners for the PPP Program. In 2008, the HWLA program was created, and although implemented in conjunction with a subset of the PPP contractors, the program has separate agreements. Going forward, we have chosen to combine the PPP and HWLA agreements into a single agreement with two re named components, HWLA Matched (matched by federal funding) and HWLA Unmatched. Although DHS has chosen to designate this component as "Unmatched", it should be noted that some costs associated with this component may be partially matched by Safety Net Care Pool funds. All contractors will be required to participate in HWLA Matched Program component.

Recommendation Number 2:

Approval of the delegations requested in the Unmatched Program will permit DHS to respond to the individual financial needs of each Community Partner, ensuring that each Partner is able to maximize its allocated funds to the fullest extent possible in each FY, and also will permit DHS to ensure that funds across the Unmatched Program also are used to their fullest extent.

These delegations are necessary as neither DHS nor the Community Partners can determine with complete accuracy the service demands that will arise in a FY either as to a particular service site or as to a particular category of service. Accordingly, these delegations will permit both DHS and the Community Partner to respond to rapidly to changing needs over the course of each FY. DHS will ensure that all funding reallocations and transfers are in accordance with the Allocation Methodology as applicable.

Recommendation Number 3:

DHCS is responsible for setting and adjusting each Community Partner's Medi-Cal PPS Rate. Under the terms and conditions of the Waiver, the County must reimburse its FQHC and FQHC Look-alike Partners at the PPS Rate as it is currently set or may be

adjusted. Accordingly, the Director requires delegated authority to adjust each FQHC and FQHC Look-alike Partner's PPS rate to respond to State adjustments.

Likewise, the County's obligation to pay the PPS Rate flows from the status of each Community Partner. Therefore, if a Partner either gains or loses FQHC or FQHC Lookalike status during the term of the Agreements, the Director requires the ability to respond to those changes and to adjust the rate paid to a Partner. In this way, Partners who must receive the Medi-Cal PPS Rate under the terms of the Waiver will receive that rate and, conversely, those who no longer qualify for that enhanced rate will have their rates adjusted

Recommendation Number 4:

At this time, both the State and CMS are finalizing many aspects of the Waiver's implementation. Further, the State has yet to produce the agreement that it will require with the counties in order to implement the Waiver at the local level. Finally, many changes and requirements implemented thus far have been on short notice.

Given these facts, DHS anticipates that, in the coming months, both the State and CMS may reach understandings as to Waiver implementation that will impact the Community Partner Agreements such that those Agreements will need to be amended, perhaps on short notice. This delegation will permit the Director to incorporate changes required by the State or CMS.

Implementation of Strategic Plan Goals

The recommended actions support Goal 4, Health and Mental Health of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

Matched Program Payment Structure

The Matched Program component of the agreements will not have maximum obligations, in order to comply with requirements of the Waiver, for patient access. Capping maximum expenditures effectively caps access for Matched Program Patients, which is counter to the terms and conditions of the Waiver. However, for budgetary planning, each Community Partner's agreement contains estimated Matched Program expenditures for each period.

Primary and Specialty Care:

For Community Partners which are FQHC or FQHC-Look alikes, payment for primary care visits will be reimbursed at each clinic's Medi-Cal PPS Rate or \$109 per visit, whichever is greater.

As to Specialty Care, for Community Partners with on-site specialty care, they will be reimbursed at each clinic's PPS Rate or \$109 per visit, whichever is greater. For Community Partners that refer patients to off-site specialty care providers, reimbursement will be at the applicable Medicare Rate for the specialty service provided by the off-site provider.

For Community Partners which are not FQHC's, reimbursement for both primary and specialty care visits will be at \$109 per visit.

Pharmaceuticals:

For all Community Partners, pharmaceuticals will be reimbursed at the 340B drug acquisition cost through June 2012. Because of the complicated nature of the Medi-Cal PPS Rate, for FQHC and FQHC Look-alikes, the contract will allow for reimbursement if these providers certify, an on annual basis, that reimbursement for pharmaceuticals is not included in their PPS rate. The County will have the right to disallow any claims if the certification proves inaccurate, and the Partners have agreed to indemnify and hold the County harmless for the submission of their claims to the State and federal governments if those claims later are found inaccurate. Finally, DHS, in conjunction with its Partners, will explore alternative payment mechanisms as well as the different means by which the County may be able to assist its Partners in obtaining pharmaceuticals in advance of the June 2012 date for the termination of pharmacy reimbursement.

Laboratory and Radiology:

For all Community Partners, reimbursement for laboratory and radiology services will be at the lesser of actual cost or the Medi-Cal rate. Again, for FQHC and FQHC Lookalikes, the contract will allow for reimbursement if these providers certify, on an annual basis, that reimbursement for these services is not included in their PPS rate. The County will have the right to disallow any claims if the certification proves inaccurate, and the Partners have agreed to indemnify and hold the County harmless for the submission of their claims to the State and federal governments if those claims later are found inaccurate.

Unmatched Program Payment Structure

The Unmatched Program component of the agreements will have maximum obligations for each provider for each category of services and time period. The total Unmatched Program maximum obligation for all providers for the period July 1, 2011 through June 30, 2012 is \$56,549,490 [consisting of \$15,509,000 Tobacco Settlement Funds and \$41,040,490 Net Cost (NC)]. The total Un-matched Program maximum obligation for the period July 1, 2012 through June 30, 2013 is \$56,549,490 (consisting of \$15,509,000 Tobacco Settlement Funds and \$41,040,490 NC). The total Un-Matched Program maximum obligation for the period July 1, 2013 through December 31, 2013 is \$28,274,745 (consisting of \$28,274,745 NC).

Reimbursement for all services provided is structured as follows:

Primary, Dental and Specialty Care:

Primary care visits will be reimbursed at \$94 per visit, inclusive of pharmaceuticals and ancillary services, including radiology and laboratory. Dental visits will be reimbursed according to Denti Cal guidelines and will be limited to specific procedures listed under the Agreement. Specialty care services also will be limited to specified visit codes/ procedures listed in the Agreement and will be reimbursed at applicable Medi-Cal rates for each procedure

Pharmaceuticals:

Pharmaceuticals required for dental and specialty care will be reimbursed at the 340B drug acquisition cost through June 2012. Again, DHS, in conjunction with its Partners, will explore alternative payment mechanisms as well as the different means by which the County may be able to assist its Partners in obtaining pharmaceuticals in advance of the June 2012 date for the termination of pharmacy reimbursement.

Ancillary Services:

For Specialty Care providers only, reimbursement for laboratory and radiology will be at the applicable Medi-Cal Rate

Funding for these agreements is in the DHS 2011-12 Recommended Budget. DHS will monitor the growth of the HWLA-Matched component of the HWLA Program and consult with the CEO during the year to determine the need for mid-year appropriation adjustments.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Since 1996, the County has had agreements with the Community Partners under the PPP Program. The current set of PPP agreements was approved by your Board on June 15, 2010, when superseding agreements were approved with 54 PPP Program Strategic and Traditional Partners, effective July 1, 2009, with automatic renewal through June 30, 2012. These agreements will be superseded by the proposed new superseding agreement.

On February 6, 2008, your Board approved amendments to the PPP agreements with providers in SPA 6, for the provision of expanded access to urgent care services, funded by the South Los Angeles Medical Services Preservation Fund, established by Senate Bill (SB) 474. These services continued in the subsequent amendments of the PPP agreements and will continue in the proposed superseding agreements. Although funding for these services is now included in the Waiver, DHS elected to maintain a separate reimbursement category for these services to permit tracking of the funding and to permit early termination of the services in the event that the facility that will replace the County's former MLK-Harbor Hospital opens during the term of these Agreements.

In August, 2005, the California Department of Health Services (CDHS), now called DHCS, and CMS entered into a five year, Section 1115 Medi-Cal Hospital/Uninsured Care Demonstration Project. Under that project, CDHS made available to certain counties, including Los Angeles County, federal funds for the expansion of health care coverage to single adults who had incomes of up to 200 percent of FPL through the Health Care Coverage Initiative

In April, 2007, DHS, acting on behalf of the County, secured \$54 million per year for three years to fund its former HWLA Health Care Initiative Program. DHS implemented this program at its directly operated facilities as well as through a number of its PPP providers. On February 12, 2008, your Board approved 32 HWLA agreements, 31 of which were executed. Three additional agreements were approved by your Board on November 3, 2009. On June 9, 2010, the 34 agreements were amended, extending them through June 30, 2012. Subsequently, three more agreements were executed under delegated authority. These 37 agreements will also be superseded by the proposed new superseding agreement.

On January 12, 2010, your Board approved agreements with new and existing PPP provider agencies for the period January 1, 2010 through December 31, 2012, to expand clinic capacity for the PPP Program to new and existing sites. These Community Clinic Expansion Program (CCEP) agreements will not be affected by this Board action. Community partners will be encouraged to enroll eligible CCEP patients

into the HWLA Matched component, giving them more capacity for new Unmatched Program component clients.

CONTRACTING PROCESS

Existing PPP contractors, both Strategic and Traditional Partners, were selected as a result of the May 2006 Request for Proposals (RFP) for PPP Primary Care, Dental Care and Specialty Care Services.

In 2008, PPP Strategic Partners were offered a HWLA agreement and 34 PPP Strategic Partners have current agreements. The terms of the new California 1115 Waiver's LIHP require the County to include at least one FQHC in its network. As one of the 10 existing Coverage Initiative counties, where current HWLA enrollees will be "grand-fathered" into the new program, it makes most sense to build on the existing PPP and HWLA agreements. A condition of the proposed superseding agreements is that all existing PPP providers participate in the HWLA Matched Program

It should be noted that some standard County contract provisions were altered during negotiations. First, the Community Partners asked that the County extend mutual indemnification. DHS, in consultation with the CEO, determined that this change would be appropriate since the Community Partners and DHS will share responsibility for providing health care to many HWLA patients such that both parties may bear risk for acts or omissions committed by the other party.

Second, the Partners asked that the County modify its standard provision concerning immediate termination for material breach of contract. To that end, the Partners asked that the contract define "material breach," that the right to terminate be extended to them as well as to the County, and that a "cure" period be added to enable the parties to meet and confer to remediate a breach prior to any termination. The provision was modified to meet these requests. However, the County maintains the right to terminate if discussions cannot cure the breach. Any termination recommendation by DHS would be brought to your Board.

As the program grows between now and January 1, 2014, when DHS anticipates that all HWLA enrollees will be transitioned into Medi-Cal, DHS expects to propose expansion of the HWLA Matched Program network. DHS intends to undertake a solicitation to determine if any FQHCs or FQHC Look-alikes, which are not HWLA Program Partners have an interest in a HWLA Matched Program agreement. Second, DHS intends to determine the interest of non-FQHC community clinics in becoming a HWLA Matched Program Community Partner. DHS will not propose this expansion immediately because a necessary pre-condition to expansion is success in implementing a new referral system and returning HWLA Program patients to Community Partners for

primary care after they are seen in a DHS facility. DHS requires additional time to meet these conditions before it attempts to expand its Community Partner pool.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommendations will ensure that DHS is able to meet the most time sensitive requirements of the 1115 Waiver.

Respectfully submitted,

Mitchell H. Katz, M.D.

Director

MHK:JS

c: Chief Executive Office

County Counsel

Executive Office, Board of Supervisors



ADOPTED

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

30 June 19, 2012

Suchi a. Hamai

EXECUTIVE OFFICER

Los Angeles County **Board of Supervisors**

June 12, 2012

Gloria Molina

First District

Mark Ridley-Thomas Second District

Zev Yaroslavsky

Third District

Don Knabe Fourth District

Michael D. Antonovich Fifth District

Mitchell H. Katz, M.D.

Hal F. Yee, Jr., M.D., Ph.D. Crief Medical Officer

Christina Ghaly, M.D. Deputy Offector, Strategic Planning

The Honorable Board of Supervisors County of Los Angeles

383 Kenneth Hahn Hall of Administration

500 West Temple Street

Los Angeles, California 90012

Dear Supervisors:

APPROVAL TO AMEND HEALTHY WAY LA CARE INITIATIVE **AGREEMENTS** (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

SUBJECT

313 N. Figueroa Street, Suite 912 Los Angeles, CA 90012

> Tel: (213)240-8101 Fax: (213) 481-0503

Request approval to amend the Healthy Way LA Health Care Initiative agreements to implement programmatic and administrative changes.

www.dhs.lacounty.gov

To ensure access to high-quality, patient-centered, cost-effective nealin care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

IT IS RECOMMENDED THAT YOUR BOARD:

Authorize the Director of Health Services (Director), or his designee, to execute amendments to current Healthy Way LA (HWLA) Agreements, substantially similar to Exhibit 1, with the Community Partners listed in Attachment A, effective upon Board approval, through December 31, 2013, to permit the Department of Health Services to implement programmatic and administrative changes, as detailed herein



www.chs.lacounty.gov

The Honorable Board of Supervisors 6/12/2012 Page 2

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

On November 2, 2010, the California Department of Health Care Services (DHCS) and Centers for Medicare and Medicaid (CMS) entered into a new 1115 Waiver, commonly known as the California Bridge to Reform, for a five year period, commencing November 1, 2010. This Waiver provides the framework to move to federal Health Care Reform in 2014 for Medicaid Coverage Expansion (MCE) enrollees who are adults, aged 19-64, with income at or below 133 percent of the Federal Poverty Level (FPL) and who meet citizenship or legal residence requirements. The Waiver will provide health care coverage expansion, continued partial funding of public hospitals' uncompensated costs, new funding for delivery system improvements at public hospitals, Medi-Cal Managed Care coverage for Seniors and Persons with Disabilities (SPDs), and federal matching funds for various State-only funded programs

On December 14, 2010, your Board authorized the Director, acting on behalf of the County, to participate in the new California 1115 Waiver and its Low Income Health Program (LIHP), and to submit all documents necessary to implement its intent to participate. Your Board also authorized the Director to expand HWLA in accordance with the Waiver's terms. DHS submitted its LIHP application to DHCS on February 14, 2011, and received initial approval on April 12, 2011.

On June 14, 2011, your Board approved the current HWLA Agreement with Community Partners covering HWLA-Matched and Unmatched Services for the HWLA Health Care Initiative Program to implement the MCE component of the LIHP, as part of the California 1115 Waiver. These agreements replaced the previous Public Private Partnership (PPP), HWLA, and SB474 contracts. On September 20, 2011, your Board delegated authority to DHS to execute amendments to existing HWLA-Matched agreements and to offer new HWLA-Matched agreements, to accommodate the transition of current Ryan White Care Act (Ryan White) program clients to HWLA. On January 10, 2012, your Board delegated authority to DHS to amend existing Community Partner agreements to implement administrative and programmatic changes in order to respond to the evolving needs of the HWLA Matched and Unmatched Programs.

Implementation of the HWLA program has come with challenges and provided many lessons during this past year. Through the concerted efforts of DHS staff and the Community Partners, there is consensus among the parties to the HWLA Agreements that the recommended amendment takes a significant step toward improving HWLA for all the stakeholders, the most important being the patients who obtain services through the HWLA Matched and Unmatched Programs

Approval of the recommendation will allow the Director, or his designee, to execute amendments, substantially similar to Exhibit I, to make administrative and programmatic changes that go beyond the scope of the delegated authority approved by your Board on January 10, 2012. The recommended changes include:

- Extending the County's commitment to reimburse Community Partners for pharmaceuticals at 340B drug acquisition cost beyond June 30, 2012, to the expiration date of the Agreement (December 31, 2012). At the time the Agreement was developed, it was anticipated that DHS, in conjunction with the Community Partners, would explore alternative payment mechanisms including alternative means by which the County may be able to assist the Community Partners in obtaining pharmaceuticals in advance of the June 2012 date for the termination of pharmacy reimbursement. While DHS and the Community Partners are still looking at alternative payment structures, it is unlikely that any change will be implemented by June 30, 2012. In addition, with the pending transition of Ryan White program clients into HWLA, DHS' focus with regard to pharmaceutical reimbursement has shifted to establishing a 340B contract pharmacy administrator services

The Honorable Board of Supervisors 6/12/2012 Page 3

arrangement and pharmacy network to ensure this patient population is not substantially impacted by the move from one payer source to another

- Extending laboratory and radiology coverage for the Matched Program beyond June 30, 2012, the current end date. Similar to the pharmacy reimbursement arrangements, DHS had intended for this reimbursement to be short-term, with alternative mechanisms developed, but, again, it is unlikely that such alternatives will be in place prior to the current expiration of the reimbursement arrangement.
- Including as billable services radiology and radiology interpretive services that will be payable for Matched Program Patients. Requests for CT or MRI scans must be submitted through County's Utilization Management.
- Permitting Community Partners to provide prescription medication in specific and defined circumstances separate and apart from a billable visit to permit more flexibility in how Community Partners provide patient care
- Deleting all ICD-9 codes under "Psychiatric" on the Excluded Services list to allow Community Partners to reference a mental health diagnosis code when prescribing mental health medications for Tier II mental health.
- Revising the existing process by which Community Partners accept referrals of Unmatched Patients from DHS Specialty Care Clinics
- Revising pharmacy provisions for the Matched Program that allow dispensaries, as well as pharmacies, to obtain the existing \$4.00 reimbursement for generic discount pharmaceuticals.
- Creating a mechanism to allow a Request for Information process to reallocate funding for Matched Program Specialty Care
- Revising provisions related to claiming and reimbursement in the HWLA Matched and Unmatched Program to reflect DHS' upcoming transition from Websphere to the LEADER/Your Benefits Now (YBN) system and to address the impact of those changes on claiming and reimbursement for patients who move from Matched to Unmatched

Additional administrative and programmatic changes will be made to the HWLA Agreements through delegated authority approved by your Board on January 10, 2012. These changes are reflected in the recommended Amendment and include:

- Changing the claims submission deadline for Community Partners by allowing Community Partners to submit their claims any time but no later than August 15th for new claims, and September 15th for the appealed claims for the prior fiscal year.
- Extending the use of the COI form for existing Unmatched Program Patients through September 2012 or until LEADER/YBN is implemented, whichever is sooner.
- Clarifying the rules for closure of Community Partners clinics to new Matched and/or Unmatched Program Patients
- Clarifying that interpreter services are available to both Matched and Unmatched Program Patients.

The Honorable Board of Supervisors 6/12/2012
Page 4

- Revising the mental health referral process to clarify that the process for referring a patient to the Department of Mental Health is the same for both Matched and Unmatched Program Patients

Implementation of Strategic Plan Goals

The recommended actions support Goal 1, Operational Effectiveness of the County's Strategic Plan

FISCAL IMPACT/FINANCING

The HWLA Matched Program agreements do not have a maximum obligation in accordance with the terms and conditions of the 1115 Waiver. To the extent that the recommendations in this Board letter will expand medically necessary services to the HWLA Matched population, those costs will be subject to the 50percent Federal Revenue match. To the extent the recommendations expand services in the Unmatched Program, those costs will be included as part of the existing maximum obligations for each contractor and will not result in any increases to those obligations.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

On June 14, 2011, your Board approved agreements with Community Partners covering HWLA-Matched and Unmatched Services for the HWLA Health Care Initiative Program to implement the MCE component of the LIHP, as part of the California 1115 Waiver. These agreements replaced previous Public Private Partnership agreements, HWLA, and SB474 contracts.

On September 20, 2011, your Board delegated authority to DHS to execute amendments to existing HWLA-Matched agreements and to offer new HWLA-Matched agreements, to accommodate the transition of current Ryan White Care Act program clients to HWLA.

On January 10, 2012, your Board delegated authority to DHS to amend existing Community Partner agreements to implement administrative and programmatic changes in order to respond to the evolving needs of the HWLA Matched and Unmatched Programs

CONTRACTING PROCESS

Not applicable.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommendation will allow DHS to make programmatic and administration changes to the HWLA Agreements aimed at improving the HWLA program for all stakeholders, including the patients who obtain services through the HWLA Matched and Unmatched Programs

The Honorable Board of Supervisors 6/12/2012 Page 5

Respectfully submitted,

mulhed Kg

Mitchell H Katz, M.D.

Director

MHK:pps

Enclosures

c: Chief Executive Office County Counsel Executive Office, Board of Supervisors

ATTACHMENT A

LIST OF HWLA COMMUNITY PARTNERS

	COMMUNITY PARTNER	HWLA CONTRACT NUMBER
1	AIDS HEALTHCARE FOUNDATION	H-705105
2	ALL FOR HEALTH, HEALTH FOR ALL, INC	H-704829
3.	ALTAMED HEALTH SERVICES CORPORATION	H-704830
4	AMERICAN INDIAN HEALING CENTER, INC	H-704831
5	ANTELOPE VALLEY COMMUNITY CLINIC	H-704832
6.	ARROYO VISTA FAMILY HEALTH FOUNDATION	H-704833
7	ASIAN PACIFIC HEALTH CARE VENTURE, INC	H-704834
8.	BAART COMMUNITY HEALTHCARE	H-704835
9	BIENVENIDOS CHILDREN'S CENTER INC	H-704836
10.	CATHOLIC HEALTHCARE WEST OF SOUTHERN CALIFORNIA	H-705098
11	CENTRAL CITY COMMUNITY HEALTH CENTER, INC.	H-704837
12,	CENTRAL NEIGHBORHOOD HEALTH FOUNDATION	H-704838
13	CHILDREN'S DENTAL FOUNDATION	H-704839
14	CHILDREN'S HOSPITAL LOS ANGELES	H-705099
15.	CHINATOWN SERVICE CENTER	H-704840
16	CITY OF LONG BEACH DEPARTMENT OF HEALTH & HUMAN SERVICES	H-705109
17	CITY OF PASADENA PUBLIC HEALTH DEPARTMENT	H-705100
18	CLINICA MONSEÑOR OSCAR A ROMERO	ਮ-704841
19.	COMMUNITY HEALTH ALLIANCE OF PASADENA	H-704842
20	COMPREHENSIVE COMMUNITY HEALTH CENTER	H-704843
21	COMPTON CENTRAL HEALTH CLINIC, INC	H-704844
22	DURFEE FAMILY CARE MEDICAL GROUP	H-704845
23,	EAST VALLEY COMMUNITY HEALTH CENTER, INC	H-704846
24	EL DORADO COMMUNITY SERVICE CENTER	H-704847
25	EL PROYECTO DEL BARRIO	H-704848
26.	EMILE G. SHENOUDA, M.D., INC	H-704849
27	FAMILY HEALTH CARE CENTERS OF GREATER LOS ANGELES, INC	H-704850
28.	GARFIELD HEALTH CENTER	H-704851
29	HARBOR COMMUNITY CLINIC	H-704852
30.	JWCH INSTITUTE, INC.	H-704853

ATTACHMENT A

LIST OF HWLA COMMUNITY PARTNERS

COMMUNITY PARTNER	HWLA CONTRACT NUMBER
31 KOREAN HEALTH, EDUCATION, INFORMATION AND RESEARCH CENTER	H-704854
32 KORYO HEALTH FOUNDATION	H-704855
33 LONG BEACH MEMORIAL MEDICAL CENTER dba MILLER CHILDREN S HOSPITAL LONG BEACH	H-705102
34 LOS ANGELES FREE CLINIC, dba THE SABAN FREE CLINIC	H-704856
35 MISSION CITY COMMUNITY NETWORK INC	H-704857
36. NORTHEAST COMMUNITY CLINIC .	H-704858
37 NORTHEAST VALLEY HEALTH CORPORATION	H-704859
38. PEDIATRIC & FAMILY MEDICAL CENTER doa EISNER PEDIATRIC & FAMILY MEDICAL CENTER	H-704860
39 POMONA VALLEY HOSPITAL MEDICAL CENTER / COMMUNITY HEALTH CENTER	H-704861
40 QUEENSCARE FAMILY CLINICS	H-704862
41 SACRED HEART FAMILY MEDICAL CLINIC, INC.	H-704863
42 SAMUEL DIXON FAMILY HEALTH CENTER, INC.	H-704864
43 SOUTH ATLANTIC MEDICAL GROUP, INC	H-704865
44 SOUTH BAY FAMILY HEALTHCARE CENTER	н-704866
45 SOUTH CENTRAL FAMILY HEALTH CENTER	H-704867
46 ST JOHN'S WELL CHILD AND FAMILY CENTER, INC	H-704868
47 THE CLINIC, INC	H-704869
48 TARZANA TREATMENT CENTER, INC	H-704870
49 THE CATALYST FOUNDATION FOR AIDS AWARENESS AND CARE	H-704871
50 THE CHILDREN'S CLINIC, 'SERVING CHILDREN AND THEIR FAMILIES'	H-704872
51 THE CHURCH OF OUR SAVIOUR	H-704873
52 UNIVERSAL HEALTH FOUNDATION	H-704874
53. UNIVERSITY MUSLIM MEDICAL ASSOCIATION, INC	H-704875
54 URDC HUMAN SERVICES CORPORATION	H-704876
55 VALLEY COMMUNITY CLINIC	H-704877
56 VENICE FAMILY CLINIC	H-704878
57 WATTS HEALTHCARE CORPORATION	H-704879
58 WESTSIDE FAMILY HEALTH CENTER	H-704880
59. WESTSIDE NEIGHBORHOOD CLINIC	H-704881
SO WILMINGTON COMMUNITY CLINIC	H-704882

Healthy Way LA Health Care Initiative Allocation RFI PROPOSED REALLOCATION July 1, 2012 through June 30, 2013 Allocation (1)

	L						CEDIACE TABLES	Contractor operation	8 ****											
AGENCY! HEADQUARTERS ADORESS	A28	PRIMARY PROPOSED ALLOCATION REALLOCATION	PROPOSED		DENTAL	PROPOSED	PROPOSEO	ECIALTY	e	PROPOSED SPECIAL TY	S8474 SPA 6	- PROPOSED	DROPOSED			SERVICE TYPE PECULITY PRO	□ >:::		ITAL MATCHED	PROPOSED TOTAL
SINC LOCAL TUCKOR COUNDATION	-						ALLOCATION	CATION			_	REALLOCATION			ALLOCATION A	ALLOCATION REALL	REALLOCATION	SPECIALTY	PROGRAM	CONTRACT
TOO THE PARTY IN THE POST OF THE PARTY IN TH	-			-										WEX NOW		100000000000000000000000000000000000000	- Constant	1		
	~		+	4	-												•			
	- -		-	4	-															
	4 4		+	+	-															
	، ا	1	+	+	1															
	0 ~		+	+	+	1											·			
	. 00		+	+	+	+				1								•		
		-		<u> </u>		1														
fotal		S		8	2	8	8	8	5	5	\$									
ALL FOR HEALTH, REALTH FOR ALL, INC.	2 1,5		Ц	1,156,809	٥	0	0	8	٥	0	0		10	3 8	\$75'002'77¢	\$20,000	2	\$20,000	\$22,826,574	\$22,826,574
1.00 M	\dashv	1,337,244 (180,435)	Ш	1,809	0	0	0	ō	0	0	0			1 156 6/0	201 345	1000		-		
ALIAMED HEALTH SERVICES CORPORATION	es	365.810	592	355.810	_	-	ľ					` 		Englan 1	CHEVER	40,397	(156.03)	°	237,315	1,394,124
	4			2	,	5	0	0	0	0	٥	٥	•	365,810						
	-]-		-													· - · · ·				
	_	257,022	257	257,022	٥	•	٥	-	o	•	c	•		-						
	4					•	•	•	>			0	0	257,022	•					
	4 1		-	+	+															
	" [-]	1,262,567	1,262	1,262,567	٥	٥	٥	33,240	٥	33,840	0	0		1 296 407						
	~ [~			-						,								·	-	
1034	ĩ	1,885,399	1,835	1,885,399	٥	0	٥	\$3.840		078 22	1	ľ								
AMERICAN INDIAN REALING CENTER, INC.	1	30,050	8	080	0	0	٥	٥	0	0	0			1,919,239	8,105,563	25,410		25,410	8,130,978	10,050,217
					H					-				0			+	1		
TO DESCRIPTION OF THE PROPERTY	-	30,080		30,080	٥	0	0	0	0	0	0	0	0	30,030	121 194	140	~			
PANIELUYE VALLET COMMUNITY CLINIC	- -	41,830		61,830	°	0	0	0	0	0	0	0		41,830		2	•	2	120,234	151,414
ADDOVO META FAMILY MEASURY	1	41,830			•	٥	٥	0	0	۰	٥	0		41,830	530,324	140	٥	VFL	130 161	100,000
	¥ 1	1,036,994	0 1,036		255.973	0	225,973	-	0	0	٥	0	٥	1,262,967						455,604
ASIAN PACENC HEALTH CARE VENTURE,	•	1015 454	ľ	000000	616,632	3	275,973	•	٩	1	•	0	0	1,262,967	4,114,657	25,339	0	25,339	4,139,996	5,402,963
				828	>	3	Э	•	0	0	0	٥	٥	960,212						
1742		1,128,282 (55,242)	ı	1,073,040	٥	0	0	6			0			112,828						
BAART COMMUNITY HEALTHCARE	Ц			331,322	•	0	0	0	0	2 0	2 0	0		1,073,040	3,265,252	39,120	0	39.120	3,304,372	4,377,412
		22,222		22,222	0	0	0	0	٥		0		0	228,322						
	9	İ	ı	480,566	0	0	0	0	٥	O	224,356	(36,456)	168,8	649,426						
CACAMETAN SECTION IN SECTION OF THE		1,216,436 (120,376)	٦	\$110	0	0	٥	0	٥	0	204,356	(36,496)	L	1,264,970	369.292	0		1	100,000	100
SERVENICOS CHILINENS CENTEN MC.		224,754	0 224	224,754	-			0	0	0	٥		L	224.754	+	<u> </u>	1	,	767'605	1,634,262
CATHOLIC BE BI TACADE IMESTICE	1	224,754		224,754	٥	0	0	0	0	0	0	0	0	224.754	360136			-	200.026	
ALIMAN INTERNATIONS WEST OF	- 	0	•	0	٥	٥	٥	٥	0	0	0	0		,		<u> </u>	+	*	\$20,78	200
folia	1	-	+	\downarrow	+	1										-	+	+	-	
CENTRAL CITY COMMUNITY HEALTH	9	430330	430	420,323	\ \ \	1					٥			0	2,993,634	2,000	0	2,000	2,995,634	2,995,634
into j	Ļ	430330	L	130 333	> <	,	9	0	0	٥	142,504	(44,349)	98,164	528,496						
CENTRAL NEIGHBORHOOD NEALTH	9	189 178		200 328	,		3 (3	0	•	142,504	(44,340)	ļ	528,496	853,813	1,745	٥	1,745	\$55,258	1,384,054
FOUNDATION	Ļ			1007	0	٥	0	0	٥	٥	64.766	(75,55)	39,216	288,344			H			Ī
"mi" * '()	Ĺ	189.128		249 128 1			4		1	1	1			T	-					

Healthy Way LA Health Care Initiative Allocation RFI PROPOSED REALLOCATION July 1, 2012 through June 30, 2013 Allocation/Estimated Allocation (1)

						SERVICE TYPE(S)	(S) - UNMATCHED PROGRAM PA	PROGRAM PR							r annoas	THE POST OF TAXABLE PARTY OF THE PARTY OF TAXABLE PARTY O	***************************************		
AGENCY/ HEADOUARTERS ADDRESS	740	777	PROPOSED	2 20 25 25 25	32	PROPOSED			ocococco	200	Children Condition	T	IOIAL	200 10000000000000000000000000000000000	SERVINE	irela) • maicaeu	UTROOKAM		PROPOSED
	ALLOCATION	PROPOSED REALLOCATION	PERMARY	DENTAL	PROPOSED REALLOCATION	DENTAL	SPECIALTY ALLOCATION	PROPOSED REALLOCATION	8 KG KI T	S8474 SPA 6 ALLOCATION	PROPOSED REALLOCATION	Set 1	a a	PRIMARY S	SPECIALTY RATIOCATION R	PROPOSED REALLOCATION	PROPOSED TO SPECIALTY	TOTAL MATCHED	TOTAL
13. CHELDREN'S DENTAL FOUNDATION	2	0	0	179.515	183.6441	5		•	200	ľ	-	_		_		ं	35.		
_				332,335	(128.762)	500 573	2			0	1	0	6						
Total		0	0	511.850	378.17	77.7800				•		0	202,573	-					
14. CHILDREN'S HOSPITAL LOS ANGELES		0	0	٥	0	G	9	,		•	0	3	738,474	9	0	0	0	٥	288,474
								Ì		,	>	9	2						
£ 00036		0	3	•	٥	0	٥	0		6			ľ	401.300	- 1	Ì			
15. CHANATOWN SERVICE CENTER	3 101,379	0	101.379	٥	6	6				•	,	1	3	437,708	7,000	•	2,000	433,708	493,708
1	L		304 137	0	,	,				0		0	101,379						•
)				9		•	75.137 1.137	+	+				
Het.	405,516	0 19	405.516	0	c	٧	•			ľ				-					
16 CITY OF LOWG BEACH DEPARTMENT OF	×		1	,	1	2	7			٥	0	٥	405,516	1,230,646	19,857	(8,175)	11,682	1,242,328	1,647,844
			1		3	٥	٥	0	٥	٥	٥	0	0						
7.5			Ĭ	ľ	1								-		_				
12 CITY OF PASADENA PURDIC HEALTH			1	2	9	0	٥	٥		*	0	٥	0	1,663,130	2,000	0	2,000	1,665,130	1,665,130
		3	٥	0	٥	٥	0	0	٥	٥	0	0	0		-				
79														_	_	-			
COLUMN TO THE PROPERTY OF THE	1		•	٩	٥	٥	Φ	0	0	0	0	0	0	1,446,200	2,000	ō	2000	1 448 200	1 448 200
	41.88	0	1,924,086	206,467	22,500	223,967	٥	0	0	٥		0	2,153,053						
Felici	1,924,085	i	1,924,086	206 (67	22,500	228.967	ľ	0		¢			3 453 653 6	021.010.1					
	3 506,439	1(14)	892,389	336,677	45,742	382 419	0	-		,	1	,	2,130,000	1,010,163	8/18	DWY CZ	12.154	1,891,493	4,044,546
							•	,		>		>	-L-	+	\dagger				-,,-
130	\$06,433		895,389	336,677	45,742	382,419	٥	0	0	Ŷ	0	0	1 224 8/13	12 682 627	23 700	36.360	43.000	200 000 00	
1	2 100,000	000'002	300,000	٥	۰	0	0	0		0		0	300,000	100		earles	020'11	577,733	1000,443
COMPTON CENTRAL USAN TAIN BUT BETTER			300,000		0	٥	0	0	0	٥	0	0	300,000	4,691,257	690'†	(4,069)	0	4.691.257	4.991.257
	6 85.822	(19,004)	66,818	0	0	٥	٥	0	0	20,022		220'02	098,88				-		
State of the state																			
CE CAIM VANDURENCAL COMIS	1		86,818	٥	٥	٥	٥	٥	0	20,022	0	20,022	86,840	15,924,900	٥	٥	٥	15,924,900	16,011,740
	305,124	15,000	320,124	0	0	٥	^	0	0	0		٥	320,124						
700 717 719	305 124	45,000	101 107	ľ		ļ													
T			350,124	1	2	•	•	٥	•	٥	•	0	320,124	245,904	٥	٥	0	245,904	820'995
CENTER, INC.	3 2,680,786	(17,500)	2,663,286	137,143	٥	137,143	0	0	٥	0	٥	۰	2,800,429						
. !																			• • •
(OO)	2,680,786	(17,500)	2,663,286	137,143	0	137,143	0	0	Î	٥	ä	10	2 800 429 1	2 529 903	80.035	1360.000		******	******
EL DORADO COMMUNITY SERVICE CENTER	10,068		752	0	0	٥	٥	0	°	٥		•	752			(region)	,	6,96,903	265,055,0
_]			47,000	٥	٥	٥	٥	٥	•	0		0	47,000						
	3	14,100	14,100	٥	٥	٥			٥	٥	0	0	14.100						-
_1	4		9,400	٥	٥	٥			٥	0	0	0	9,400						
_[4	106,9	213,117	٥	0	٥	٥	0	0	0		0	213,117						
	306,045		308,045	٥	٥	0	0	14,100	14,100	0		0	320,145						
STATE OF THE PROPERTY OF THE P	1		590,414	•	0	c	o	14,100	14,100	0	0	0	604,514	631,904	17,059	16,350	33,409	715.313	1,319,827
	4		1,657,902	137.143	8,460	145,603	٥	٥	0	0		°	1,803,505						
5 7	459,096	0	459,096	0	O	0	10,000	٥	10,000			•	960,694					•	
G. SHENOLIDA LITO. INC.	1		2,116,958	137,143	8,460	145,603	10,000	٥		0	0	0	2,272,601	2,325,961	35,802	0	35,802	2,361,763	4,634,364
	20,000	0	30,080	0	٥	٥	٥	٥	٥	0	٥	0	30,080						
**************************************	30,080		th result																
				7		1	٦	٩	0	0	0	0	30,080	13,080	٥	0	0	13,080	43.160

Healthy Way LA Health Care Initiative Allocation RFI PROPOSED REALLOCATION July 1, 2012 through June 30, 2013 Allocation/Estimated Allocation (1)

			100000000000000000000000000000000000000				SERVICE TYPE(S) - (S) - UNMATCHED PROGRAM ^{IS}	OCEAN P							SERVICE TY	SERVICE TYPE(S) - MATCHED PROGRAM	PROGRAM		100000000000000000000000000000000000000
1 10,100	ESS		PROPOSED REALLOCATION				PROPOSED DENTAL ALLOCATION	CCATION	******			27 to 11 to		4600 %.7.		ECIALTY P	*ROPOSED	PROPOSED SPECIALTY	TOTAL MATCHED PROGRAM	PROPOSE0 TOTAL CONTRACT
	FAMILY HEALTH CARE CENTERS OF	Ĺ.,	(951,756)	745,992	٥		6				1			+			Ç.	ALLOCATION		
1	TO 70-	27.77		2//0004	1				,	-	>	0	0	746,992						
	GARFIELD HEALTH CENTER	┸		266,392	1		1	•	٥		°	0	0	746,992	1,655,056	13,122	(13.122)	0	1,655,056	2,402,048
1 1 1 1 1 1 1 1 1 1		Ц		VII.5.12.6	7	7	•		٥	•	0	•	•	645,122						
1 1 1 1 1 1 1 1 1 1	(A)TH	Ц		645,122	0	0	¢	0	0	-	٥	ŀ		645.122	346 184	Ž		100		
1 1 1 1 1 1 1 1 1 1	DANSON COMMON I I CLIMA			547,680	0	٥	٥	٥	0	0	0		0	547,680			+		150,050	837,103
1 1 1 1 1 1 1 1 1 1	W. 75.			547,660	٥	٥	٥	Φ	0	0	0	0	-	547,660	22.22	6210	(C 210)			200
1. 1. 1. 1. 1. 1. 1. 1.	HERALD CHOSTIAN HEALTH CENTER	3	٥	0	٥	٥	٥	٥	0	٥	٥	٥	0	0	771074	2	(e17c)	3	22122	292,782
1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	33													-		-	\dagger			
1 1 1 1 1 1 1 1 1 1	W. CHINETTEE CO.	\downarrow		•	0	o	0	0	0	P	Ŷ	٥	0	0	0	0	ō	0		(
1,000 1,00	months incl.	1		1,513,682	٥	٥	0	48,200	0	48,200	٥	٥	0	1,561,882	+	+	1		7	
1,10,100 1,10,100		1		10,058	٥	0	0	0	0	0	3,478	٥	3,478	13,536			•			
1,12,120 1,12,120		4/1,890		615,060	0	0	0	31,888	0	31,883	0	0	0	646,948					••	
11730 6281 1271	COREAN HEALTH FOUNTATION	1		7.138,800	٥	٥	٥	890'08	0	80,088	3,478	0	3,478	2,222,366	2,910,908	76,545	13,048	89,593	3,000,501	5.222.867
1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,		\perp		152,713	•	0	٥	٥	٥	0	0	0	٥	152,713						
1,11,11,11,11,11,11,11,11,11,11,11,11,1	יען פר	250 250							-						_		_			
1,000 1,00	CORYO HEALTH FOUNDATION	1		51,55	9	•	°	0	0	٥	٥	٥	0	152,713	1,782,210	1,037	0	1,037		1,935,960
1		╽		301°16	3	0	0	°	0	0	٥	٥	0	97,102						Ī
The color The	7973	97.102		97 502	•															
The color The				0	0	0	9 0	0	0		*	0	0	97,102	43,600	0	°	0	43,600	140,702
1								+	,	,	1	>		0	+	+				
1	5,175	°		0	0	0	ó	0	0	0	0	0	8		533.534	1000		****		
1	OS ANGELES CHRISTIAN			0	0	0	0	0	0	٥	٥	0	0	0		Andre	+	anne	1/6,54	76,544
A A A A A A A A A A	EALTH CEATERS	4 4												Ī						
4 200 0		4																		
4 0																				
A				1																
4 2685/022 0<					0	٥	0	0	0	0	0	٥	٥	٥						
A 2865022 C 2865022 S\$17105 C C C C C C C C C		. 4																		
4 2,885,022 0					٠.				1					0						
4 2,856,022 0 2,856,022 937,108 0 937,108 0 222,823 0 222,828 0 4,054,958 0 4,054,958 0 4,054,958 0 4,054,958 0 1,567,038 0 1,567,038 0 1,567,038 0 1,567,038 0	OF MATER STORE ALMO AN THE CARLE	4		0	٥	٥	ø	0	0	0	0	0	0	0	1,697,100	0	0	٥	1.697.100	1 697 100
4 0 2886,022 937,148 0 937,148 0 0 0 4,654,958 2.551,093 1%0,138 0 1,500,000 0 <t< td=""><th></th><td></td><td></td><td>2,895,022</td><td>937,168</td><td>•</td><td>907,108</td><td>\$22,523</td><td>0</td><td>222,828</td><td>٥</td><td></td><td>0</td><td>4,054,968</td><td></td><td></td><td></td><td></td><td></td><td></td></t<>				2,895,022	937,168	•	907,108	\$22,523	0	222,828	٥		0	4,054,968						
4 0	four	2,895,022		2,895,022	937,108	0	937,108	222,828		222.828	0		1	1 001 003	A 201 A03	4AC 4A0	1	200 000		
The color of the	COMMUNITY SERVICES CENTER DEALA.	0	٥	o	٥	٥	٥	°	°	-	, ,	5	, 	OCC TANK	6,301,033	100,138	•	106,138	2,667,291	6,722,249
0 0												,	,	1						
2 856,800 119,000 56,850 25,714 15,000 40,714 0 0 0 0 0 1,000 0 1,000 0 0 1,000 0 </td <th>Total</th> <td>°</td> <td></td> <td>0</td> <td>0</td> <td>0</td> <td>Ó</td> <td>0</td> <td>0</td> <td>٥</td> <td>٥</td> <td>ő</td> <td>ŀ</td> <td>-</td> <td>3,500,000</td> <td>4</td> <td>ľ</td> <td>ľ</td> <td></td> <td></td>	Total	°		0	0	0	Ó	0	0	٥	٥	ő	ŀ	-	3,500,000	4	ľ	ľ		
3 9,400 2,500 1,500 0 0 0 0 1,500 8 4,700 2,000 6,700 0	MASSION CITY COMMUNITY METWORK, INC.	**	_	068,890	25,714	15,000	40,714	0	0	0	٥	0	0	1,037,604		-	,	,	mine	my'mx'
8 \$1,00 \$2,				08,	٥	0	0	0	0	0			٥	11,900						
124,200 124,500 124,500 135,000 40,711 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				8/9	0	0	8	0	0	٥	o		0	6,700						
22,428 12,400 1,048,708 25,714 15,000 40,714 0 0 0 0 0 0 1,108,123 1,221,000 1		L		ol y co	9 0	0	0	1	-	•	0		0	33,218						
	Total .	924,208		1,048,708	25,714	15,000	40,714	0	0		4		ľ	4 000 433	1000					

Healthy Way LA Health Care Initiative Allocation RFI PROPOSED REALLOCATION July 1, 2012 through June 30, 2013 Allocation/Estimated Allocation (1)

COUTER PRINCIPLY PROPOSED							SERVICE TYPE/S1.1	S) - LINUATOREN PROCESSUR	Pove Aug											
1 1 1 1 1 1 1 1 1 1				PROPOSED	XX 1,353, 1055, 15520.	r	napopoda									SERVICET	YPE(S) - MATCHED 1	PROGRAM		
1 1 1 1 1 1 1 1 1 1		₹	PROPOSED REALLOCATION					CATION							~		Comment of the Commen	10.00000	DTAL MATCHED	TOTAL
1 1 1 1 1 1 1 1 1 1		Ц	95'51)	903,806	ō	0	٥	o	-	0	0			_	_		:: <u> </u>		The state of the s	
1 1 1 1 1 1 1 1 1 1	<u> </u>				٥	٥	٥	٥	0	0	37,224	28.967	66.191	181 247						
1 1 1 1 1 1 1 1 1 1	~ 0	1			0	٥	٥	0	0	0	٥		٥	280,684						
1				╙	•		٥	0	0	0	٥		0	232,838						
1 10 10 10 10 10 10 10	NORTHEAST VALLEY HEALTH 2	L			•	•		•	0		33,224	28,967	66,191	1,288,575	1,093,799	906'9	(6,306)	0	1,093,799	2,392,374
1 1,11,111 1,11,		2,107,810		_,[713,405	0	713,405	0	0	*		٥	0	2,414,713] 			
1 1,11,111 1,11,	+	1		1	713,405	ô	713,405	0	0	0	٥	٥	0	2414,713	8.334.260	65,665		1 303 88	200000	44.041
1 1,197					84.83		599,465	0	٥	O	0	0	0	1,938,103				100	675'665'9	10,814,638
1 10,000	吹	1,357,238			599,465	0	599-665		0											
1,	_	_		780,670	o	٥	٥	0	0	0	0	1		780,670	4,074,670	27,174	(21,126)	•	1,074,470	3,012,573
1 1 1 1 1 1 1 1 1 1		780,670		720.670	- -															
1 1 1 1 1 1 1 1 1 1		ľ	L	ľ	577.804	18,000	200 604	0 300	0	5	0	0	o	780,670	231,080	٥	0	0	231,080	1,011,750
1. 1. 1. 1. 1. 1. 1. 1.	7	Ц			319,109	12,000	331.68	00000	(0) (0)	191,236	0	0	0	4,225,480						Ī
	4	Ц		11	891,913	30,000	921,913	220,336	(02,130)	181238	2 6	0		894,555						
	_	1		64,014	0	0	0	0	0	0	23,312		23312	87.376	418780878	88,048	51,500	149,548	5,453,522	10,573,557
1. 1. 1. 1. 1. 1. 1. 1.		54018		L												-	-	+		
	╆	ļ	23.8	L		0	•	0	0	0	23,312	0	23,312	87,326	187,044	0	°	0	187,044	274 370
1 1 1 1 1 1 1 1 1 1	<u>L.</u> ,			L	,		1	9	0	•	٥	٥	0	78,584						
1 1962 196		56,196		L	0	o	•				1				_					
1	_	Ц			0	ō	٥	0	•	* ·	9 4			78,584 52,64	522,764	0	0	0	522,764	601,348
1. 1. 1. 1. 1. 1. 1. 1.	~]	_			0	0	0	٥	0	10	0	0		20,01 20,034						
1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,	<u>~</u>	ĺ		43,992	٥	0	٥	ô	٥	0	0	0	6	43.992						···
1,225.56.34 (10.5.0) 2,114.718 20.45.72 (10.5.0) 2,114.718 20.45.72 (10.5.0) 2,114.718 20.45.72 (10.5.0) 2,114.718 20.45.72 (10.5.0) 2,114.718 20.45.72 (10.5.0) 2,114.718 20.45.72 (10.5.0) 2,114.718 20.45.72 (10.5.0) 2,114.718 20.45.72 (10.5.0) 2,114.718 2,144.72 (10.5.0)		\downarrow				•	•	°	٥	0	0	0	0	216,389	422,920	0	0	•	472.920	679 209
1,2,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,					208,572	٥	208,572	11,280	۰	11,280	٥	0	0	2,338,570						
1 1 1 1 1 1 1 1 1 1		2,225,638		Ц	203,572	0	208,572	11,280	0	11,280	¢	-								
Table Tabl	_	4		987,310	0	0	0	0	9	0	310,726	20000	360 726	1 348,036	2,007,213	\$2,836	(52,836)	0	2,607,573	4,946,143
15,170 10,0000 10,18,190 20,100 20,100 10,0000 10,18,190 20,100 20,100 10,0000 20,100 2	~	2820		27,820	0	0	٥	0	0	0	0	٥	0	27.820						
4 752 95.50 94.72 704.50 70.40 7		915.130		L	-		1									_	-			
Fig.	t	ļ		l	207.00	<u>- </u>	9	•	0	°	310,726	20000	360,726	1,375,856	9,775,131	5,499	(5.499)	0	9 275 121	11 100 007
6 682,200 68,150 790,350 224,517 69,462 20,0319 138,672 248,345 141,540 350,289 1,550,231 5,126 1,550,231 1,	٠			707'46	001.07	(3,473)	16,743		0	7	0	0	0	111,026		 				200
Column C		1 1 1																		
66 455.99 150.000 224,600 738,612 158,712 248,340 141,940 390,200 1,591,322 3,308,111 5,418,33 30,000 35,462 3,421,513 6 455,944 (75,630) 430,900 0 0 0 156,714 (70,531) 5,50,600 0 0 156,714 5,50,600 0 0 0 156,714 5,50,600 0		<u> </u>		9850K))(c	86 442	320,979	138,672	0	23,672	248,348	141,940	390,283	1,550,297						
6 455,594 (75,035) 430,506 0 0 0 0 0 186,474 (70,553) 45,544 (5.05,63) 45,544 (70,53) 45,544 (70		Ц		824,640	254,683	83,039	331,722	138,672	0	138,672	248,348	141,940	390,288	1,691,322	3,388,131	5433	8008	25,25	203 507 5	
8 50 505 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	- -			430,906	۰	٥	0	٥		•	165,474	(70,530)	\$5344	528.850				Tak're	2,423,333	S III S
505650 (55,055) (451,727)	الل	Ц			0	0	0	0	0	-	<	-								***************************************
		206,660			0	0	0	0	0	,	168.474	Chrani	0.000	30,566	447.000					ĺ

Healthy Way LA Health Care Initiative Allocation RFI PROPOSED REALLOCATION July 1, 2012 through June 30, 2013 Allocation/Estimated Allocation (1)

						SERVICE TYPE(S)	(S) - LINMATCHED PROCESSA	SOCDAN G					-						:
AGENCY/ HEADQUARTERS ADDRESS S	SPA BORLLON	265	PROPOSED			Usbooled	1.3		- Landon				100		SERVICE	SERVICE TYPE(S) - MATCHED PROGRAM	DPROGRAM		0300000
	4	ON REALLOCATION	PRIMARY	ALOCATION	PROPOSED REALLOCATION	DENTE	SPECIALTY ALLOCATION	PROPOSED REALLOCATION	SPECIAL TY	SE474 SPA 6 All OCATION	PROPOSED	-	9 (PRIMARY	SPECIALTY	PROPOSED	72.5	TOTAL MATCHED	TOTAL
51. TARZANA TREATMENT CENTER, INC.	1 625	625 290 124 174	749.464	20000000000		· WY (WWY)		22				ALLOCATION		-		REALLOCATION	ALLOCATION	PROGRAM	ON INC
_	2 937	937,936 243,742			s c	•	3 6	0 4	0	0	0	٥	749,484		_				
-		L	ı		,	•	9	0	•	0	0	ō	1,181,678						
	1,563,226	367,916	1,931,142	•	•	•				1									
52. CARE TO BARTZ-ALTADONNA COMMUNITY	8,				0	0	•	15,000	15000	0 0	•	0	1,931,142	5,220,664	17,407	0	17,407	5,238,031	7,169,213
THE DATE OF FAMOURAL MOUNTS	ŕ	20000								•	•	>	700'56						
THE CHE DEEN'S CHINE OF SERVICE	ľ	26'9	1		٥	0	0	15,000	15,000	0	٥	٥	51.002	802 240	2000	13.510	95931	025.000	
	× -				0	0	000'59	٥	65,000	0	٥	-	1,516,726	+		SIE'SI	SIE'CI	807712	868,761
200	19,928		19.928		0	0	0	٥	0	0	0	0	19.928						
GINNYS GIN 30 FOGISK	1			å	ö	0	65,000	0	000'59	0	0	ò	1536.654	1561561	10.017	5005			
1.	3 122	122,576 0	122,576	0	٥	٥	0	٥	٥	0	0	0	122.578	200	i N'ei	GO,OO	110,88	1,600,678	3,137,332
77												 			+				
+	1		122,576	0	0	0	0	٥	0	-	0	-	120 634	A23 524					
CONVERSIVE COMMONALI REALIN CENIER	•	•	٥	٥	٥	0	٥	0	0	0	<		,	207	,	5	٥	462,160	584,736
										,	,			+		1			
					0	٥	°	0	•	ľ	4	ļ	-	-	-				
DRIVERSAL HEALTH FOUNDATION	4 33,	33,746 20,000	53.746	0	0	٥	0	-	-	•	7		0 1	0000	٥	0	٥	900'06	90,00
									†	,	>	\$	\$	+	1	1			
ia.	33,	33,746 20,000	53,746	٥	٥	0	٥	o		,	ľ				-				
	6 274	274,198 0	274,198	0	٥	٥	9009	o	500.8	300 08	•	3	98 f '82	767'607		•	•	202,792	259,538
									nas'a	27.50	>	any so	362,403			-			
┪		274,198 0	274,198	0	0	0	6,005	0	9009	89.206	•	20, 30	404						
UKUC HUMAN SERVICES CORPORATION	9 8	090	30,080	٥	c	٥	0	٥	G		•	onvice	200,403	7,284,359	828	٥	929	2,283,949	2,653,358
, ,											,	7	80.00	+	+	1	1	-	
SV COMMUNITY OF USE	1			ô	0	Q	٥	٥	0	ē	-	-	20.020	1 120 000					
	1,339,030	(030, 522)	1,114,837	°	٥	٥	٥	٥	0	٥	0	o	1 114 837	morrise.	*	1	•	1,430,080	1,480,160
			∦														1		
WENICE FAVOR VICTIMO	1,539,030	,050 (224,193)	1,114,837	c	٥	0	0	0	0	٥	0	c	1111811	1660 900	200 06	301.00			
	3,530,942	542	3,530,942	162,735	0	162,735	215,800	°	215,800	٥	٥	0	3,909.477	noreas's	20,203	oor'et	11,925	4,745,725	5,856,562
### ##################################	3,530,942			162,735	0	162,735	215,800	6	215.800	-		1							
WALLS HEAL INCARE CORPORATION	\$ 261,414	414 (33,632)	28.1222	101,249	3,635	109,884	0	c	6	101333	2 (10)		3,908,477	\$,080,883	35,611	•	95,611	8,132,494	12,091,971
	100	111		⅃Ĺ					,	ZOO'LA	(rec'as)	8	/46/305						
WESTSIDE FAMILY HEALTH CENTER	100 070			7,10	8,635	109,884	٥	٥	٥	101,332	(44,991)	56,341	388,957	5,607,731	12.982	78 559	1517	5.6.46.223	000000
	1	\$	75,754	0	0	٥	٥	0	0	0	o	٥	348,364		-			777	627,000
10.14	348,364	364 01	770 872	•													†	T	
WESTSIDE NEIGHBORHOOD CLANC	8 405 140		079 907		•	9	0	0	-	٥	0	0	348,364	161,18	1,646	0	1.646	89.443	103 637
J.,	ļ		24.5	[^]	5	٥	0	0	0	ø	0	0	405,140	-					100
135 J	405 140	0 101	OF SOF										-						
WILMINGTON COMMUNITY CLINC	ATT 544		041'co+		-	0	•	٥	٥	0	0	0	405,140	221,483	9,352	0	9.352	230 840	A35 90A
	,		Ĭ	>	•	0	0	0	•	0	0	0	477,144	_					
ent.	477.144	141	477,144	٥		-	-			-					-		_		
	-					T	†	,	1	•	0	•	477,144	172,656	1		0	172,656	649,800
LATOT OF SERVICE AND TOTAL							1										-		•••
010000	946,000,136	Dt 967	\$43,683,796	180'059'55	\$0	\$5,450,097	\$1,003,849	3	\$1,003,849	\$1,411,748	8	\$1,411,348	\$56,549,490	\$183,318,516	\$1,075,950	<	41 075 BCA	4101 301 101	2000000
												_/	-∄			,	200000000	204,855,7814	3240,345,950

(1) Matched Program Primary Care services alboaton is an estimate.
(2) Unmatched Program Alboaton is SPA Specific.